

Title: Grants and Funding Opportunities under the Affordable Care Act
Summary of Several Sections
State Options

Overview: This document provides background information on grants and other funding opportunities available pursuant to the Patient Protection and Affordable Care Act (ACA). Although the ACA authorizes funding for hundreds of programs, less than 50 of the programs that target the areas of health and human services received a federal appropriation to be distributed to states.

The Nevada Department of Health and Human Services (DHHS) has created a number of work groups to monitor and prepare for implementation of the ACA. In addition, the Governor's cabinet of agency directors has established a task force on health care reform. That group consists of representatives from the Aging and Disability Services Division, the Division of Health Care Financing and Policy (DHCFP), the Health Division within DHHS, the Governor's Office for Consumer Health Assistance, the University of Nevada School of Medicine, the State's local health districts, and a variety of non-State agencies that have an interest in pursuing funding opportunities available through the ACA.

This paper describes the efforts of one of the subcommittees of the DHHS work group, the Grants and Funding Opportunities Subcommittee. As of October 12, 2010, based on data available to DHHS, Nevada has been awarded just under \$7 million in federal grants.

The grants that have been awarded to State agencies are listed in the following table:

Grant Title	Awarded Amount
<i>Aging and Disability Services Division, DHHS</i>	
Medicare Prescription Drug Program Outreach Funding	\$264,281
<i>Board of Regents</i>	
Primary Care Training and Enhancement	\$960,000
Geriatric Education Center Grants	\$407,311
Geriatric Training Programs for Physicians	\$591,370
Advanced Education Nursing Traineeship	\$57,816
Advanced Education Nursing Traineeship	\$15,067
Nurse Education, Practice, Quality, and Retention	\$243,825
<i>Department of Training, Employment and Rehabilitation</i>	
State Workforce Development Grants	\$149,999
<i>Division of Health Care Financing and Policy, DHHS</i>	
Money Follows the Person Planning Grant	\$200,000

Grant Title	Awarded Amount
State Insurance Exchange Planning Grant	\$1,000,000
<i>Division of Insurance, Department of Business and Industry</i>	
Rate Review Process for Premium Increase	\$1,000,000
<i>Health Division</i>	
Maternal, Infant, Early Child Home Visits	\$881,000
Strengthening Public Health Infrastructure, Component I	\$200,000
Strengthening Epidemiology, Lab and Health Information Systems Capacity	\$150,000
HIV/AIDS Prevention and Testing	\$89,268
Tobacco Prevention and Control	\$63,169
<i>Public Employees' Benefits Program</i>	
Early Retiree Reinsurance Program Application	To Be Determined

The Grants and Funding Opportunities Subcommittee is aware of the following three grants that have been awarded to non-State entities. In addition, there may be other non-State agencies that have received funding through the ACA.

- Big Brothers Big Sisters of Northern Nevada: \$400,000 for Personal Responsibility Education Innovative Strategies;
- Nevada Workforce Connections: \$150,000 under State Health Care Workforce Development funding; and
- Yerington Paiute Tribe: \$136,000 under Tribal Maternal, Infant, Early Child Home Visits.

As partnerships are solidified and the lines of communication are further opened, State agencies and non-profit entities are finding common ground. One success has been that of school-based health centers. Prior to an opportunity for funding to support school-based health centers, these centers in Nevada operated independently and did not work together in support of school-based health care. As a result of the ACA, a State association of school-based health centers has been formed, and it is now connected to the National Assembly on School-Based Health Care.

Future Funding Opportunities: There are many potential future funding opportunities under the ACA. The Subcommittee and the Department are monitoring, through a variety of sources, the announcements by federal agencies of funding availability. Some opportunities seem more realistic to apply for than others, and the Subcommittee has developed a tracking sheet that identifies some of those opportunities. The various categories of potential opportunities include the following, albeit this is a truncated list related primarily to health and human services opportunities:

- Title I—Quality, Affordable Health Care, including funding for health insurance consumer information, premium review grants, high-risk pools, wellness program demonstration projects, health insurance exchange planning and establishment grants, and grants for implementation of appropriate enrollment related to health information technology;
- Title II—Role of Public Programs, including many funding opportunities for state Medicaid programs, Aging and Disability Resource Centers, and funding for a psychiatric demonstration project under Medicaid, services to individuals with a postpartum condition, and abstinence education;
- Title III—Improving the Quality and Efficiency of Health Care, including value-based purchasing, grants or contracts for quality measure development and quality and resource measures, a rural community hospital demonstration program, Medicare Rural Hospital Flexibility Program, Medicare Prescription Drug Program, quality improvement technical assistance and implementation grants, community health teams to support patient centered medical homes, regionalized systems for emergency care responses, trauma care centers, trauma service availability, and a demonstration program to integrate quality improvement and safety training into clinical education;
- Title IV—Prevention of Chronic Diseases and Improving Public Health, including prevention and public health fund, enhanced comprehensive HIV prevention planning and implementation, supplemental funding for the Behavioral Risk Factor Surveillance System, HIV/AIDS surveillance and enhanced laboratory reporting, expanded HIV testing for disproportionately affected populations, education and outreach campaign regarding preventive benefits, grants for establishment and operation of school-based health centers, research-based dental caries disease management, oral health infrastructure, pregnancy risk assessment monitoring system, National Oral Health Surveillance System, improving access to preventive services for eligible adults in Medicaid, incentives for prevention of chronic diseases in Medicaid, community transformation grants, health aging and living well pilot project, a demonstration program to improve immunization coverage and one concerning an individualized wellness plan, epidemiology and laboratory capacity grants, a program for education and training in pain care, and an obesity demonstration program;
- Title V—Health Care Workforce, including state workforce development grants; state and regional centers for health workforce analysis; grants to nurse-managed health clinics; primary care training and enhancement; training opportunities for direct care

workers; training in general, pediatric and public health dentistry; alternative dental health care providers demonstration project; geriatric workforce development; mental and behavioral health education and training grants; nurse retention grants; grants to promote the community health workforce; demonstration grants for family nurse practitioner training programs; area health education centers; primary care extension programs; a demonstration project to provide low-income individuals with opportunities to address health professions workforce needs and one to develop training and certification programs for personal or home care aides; teaching health centers development grants; payments to teaching health centers that offer Graduate Medical Education programs, Graduate Nurse Education Demonstration for Medicare; Federally Qualified Health Centers; and awards for co-locating primary and specialty care in community-based mental health settings;

- Title VI—Transparency and Program Integrity, including funding for a nationwide program for national and state background checks on direct patient access employees of long-term care facilities; establishment and support of elder abuse, neglect, and exploitation forensic centers; enhancement of long-term care facilities; grants to enhance the provision of adult protective services; adult protective services state demonstration projects; grants to support the long-term care ombudsman program; and grants to state survey agencies related to elder justice programs; and
- Title X—Strengthening Quality, Affordable Health Care for All Americans, including a state balancing incentives program, Children’s Health Insurance Program Outreach and Enrollment, pregnancy assistance fund, program for early detection of certain medical conditions related to environmental health hazards, community-based collaborative care network program, National Centers of Excellence for Depression, National Diabetes Prevention Program, Rural Physician Training Grants, Preventive Medicine and Public Health Training Program, Infrastructure to Expand Access to Care, Community Health Center Fund, Demonstration Project to Provide Access to Affordable Care, and State Demonstration Programs to Evaluate Alternatives to Current Medical Tort Litigation.

The DHHS will continue to actively pursue funding opportunities available under the ACA, but a number of factors will go into the decision as to whether to apply for funding. The decision points will be the current staff workload, a realistic assessment of whether the program has a high probability of being awarded funding, what kind of maintenance of effort is needed, whether State matching funding will be required, and the level of future commitment if funding is awarded.

Resources for Monitoring Funding Opportunities: There are a number of resources that announce funding opportunities. The following chart identifies some of these resources that the State is using to track grant and demonstration program opportunities:

Entity Name	Website Address
Association of State and Territorial Health Officials	www.astho.org
Grants.gov	www.grants.gov
HealthCare.gov	www.healthcare.gov
Health Resources and Services Administration	www.hrsa.gov/grants
Kaiser Family Foundation	www.kff.org
National Academy for State Health Policy	www.nashp.org
National Association of Chronic Disease Directors	www.chronicdisease.org
National Association of County and City Health Officials	www.naccho.org
National Association of State Medicaid Directors	www.nasmd.org
National Conference of State Legislatures	www.ncsl.org
National Governor’s Association	www.nga.org
Robert Wood Johnson Foundation	www.rwjf.org

The federal government’s “Grants.gov” Web site has list serves that anyone may sign up for that alert people to announcements of opportunities. This site is also the one through which most grant applications are submitted.

Fiscal Impact: Some of the funding opportunities require matching funds but very few of the competitive grants require General Fund dollars as hard matches for maintenance of effort or for direct supplements for the grants. Until the actual grant announcements are made, it is not feasible to determine which funding opportunities will have a fiscal impact on the State. Given Nevada’s current economic situation, it is not likely that the State will apply for grants that require an appropriation from the General Fund.

Applicability to Nevada: Because of the volume of potential funding opportunities, combined with Nevada’s current economic climate, these potential funding sources present opportunities to continue to develop needed public health infrastructure and support services for the State’s residents.

Concluding Comments: For many states, the ACA can be a means to build capacity in order to develop and deliver services. It is difficult to plan for announcements, and even more difficult to secure funding, but the DHHS is doing what it can to be prepared for opportunities when they are presented and to be successful in its applications for funding.